

Return application to: City Hall-131 East Church Street
Lewisburg, TN 37091
(931)-359-1544

LEWISBURG POLICE DEPARTMENT

**101 Water Street
Lewisburg, TN 37091
931-359-4044**



APPLICATION FOR EMPLOYMENT

Date

Applicant Name

Position Applied

APPLICATION FOR EMPLOYMENT

THE CITY OF LEWISBURG IS AN AT WILL AND EQUAL OPPORTUNITY EMPLOYER AND DOES NOT DISCRIMINATE ON THE BASIS OF RACE, SEX, COLOR, RELIGION, NATIONAL ORIGIN, AGE, DISABILITY OR VETERAN STATUS IN EMPLOYMENT OPPORTUNITIES AND BENEFITS.

Overview of hiring and employment process: This *Application* is but one part of the hiring and employment process. Other parts may include an interview, an employment examination or test, and a demonstration of an ability to perform the essential functions of the job. If you need an accommodation in order to complete any part of the hiring and employment process, please call the following number:
931-359-1544.

Prior to completing the *Application* be sure to read the JOB DESCRIPTION of the position for which you are applying. As you complete this *Application*, please bear in mind the following:

- * we reserve the right to check all information for accuracy and completeness**
- * all applications for employment are a matter of public record**
- * if you need accommodation in order to complete this *Application*, please notify the municipality**

GENERAL INFORMATION

Date: _____ **Position Desired:** _____

Are You Applying For: _____ full time _____ part time _____ seasonal

If Part Time, What Days/Hours Are You Available: _____

Have You Applied With the City Before? (circle) Yes No

Have You Been Employed By the City Before? (circle) Yes No

PERSONAL INFORMATION

Your Name: _____
Last First Middle

Social Security Number: _____ **DOB:** _____

Phone Number: Home: () _____ **Business:** () _____

Address: _____
Number Street

City State Zip Code

Do You Have A Legal Right to Work in the U.S.?: (circle) Yes No

Are You Over the Age of 18?: (circle) Yes No

Have You Ever Been Convicted of a Felony? (note: this may be relevant if job-related, but does not bar you from employment): (circle) Yes No

If Yes, Please Explain: _____

Do you have a valid Drivers License? (circle) Yes No
Driver's License Number: _____

YOUR EDUCATION AND TRAINING

High School Attended: _____

	City		State	
Do You Have a High School Diploma? (circle)	Yes		No	

Please List Other Education You Have Received:

College/University/ Trade or Business Schools Attended	City/State	Degree Earned? ____ Type Degree	Major Area of Study
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List Other Training Received (special course, work training programs, armed forces training, etc.) _____

List Special Qualifications and Skills (licenses, skills with machines, patents or inventions, publications, etc.)

Based on the JOB DESCRIPTION of the position for which you are applying:

Are you able to perform the essential functions of the job for which you are applying, either with or without a reasonable accommodation? Yes ☐ No ☐

REFERENCES

Please List three or four persons, other than relatives or former employers who have knowledge of your character and/or abilities:

Name	Mailing Address	Yrs. Known	Phone

PRIOR EMPLOYMENT RECORD

List Below All Present and Past Employment Information and/or Substantive Volunteer Work:

Name and address of current or most recent employer: _____

Phone Number () _____ Your Supervisor: _____

Your Job Title/Responsibilities: _____

Date Hired: _____ Date Left: _____

Reason For Leaving: _____

Starting Salary: _____ Ending Salary: _____

May We Contact This Employer? (circle): Yes No

PRIOR EMPLOYMENT RECORD (Continued)

Name and address of previous employer: _____		

Phone Number: ()_____	Your Supervisor: _____	
Your Job Title/Responsibilities: _____		

Date Hired: _____	Date Left: _____	
Reason For Leaving: _____		
Starting Salary: _____	Ending Salary: _____	
May We Contact This Employer?	(circle):	Yes No

Name and address of previous employer: _____		

Phone Number: ()_____	Your Supervisor: _____	
Your Job Title/Responsibilities: _____		

Date Hired: _____	Date Left: _____	
Reason For Leaving: _____		
Starting Salary: _____	Ending Salary: _____	
May We Contact This Employer?	(circle):	Yes No

*******IMPORTANT*******

I hereby affirm that the information provided on this application (and accompanying resume, if any) is true and complete to the best of my knowledge. I understand that falsified information or significant omissions may disqualify me and my application from further consideration for employment and may be considered justification for dismissal if discovered at a later date.

I waive any right of privilege, privacy, and/or confidentiality I may have in the information provided by references or others whom I have indicated may be contacted.

Applicant Signature

Date

To Be Completed By Employer

ACCEPTANCE DATA

DEPARTMENT

JOB DESCRIPTION

EMPLOYEE NO.

SHIFT

SUPERVISOR

PHYSICAL EXAM

RATE OF PAY

START DATE

PROBATION PERIOD

DEPARTMENT HEAD APPROVAL

DATE

CITY MANAGER APPROVAL

OTHER:

IMPORTANT

***** APPLICATION CHECKLIST *****

Everything on this list MUST be included with your application. NO applications will be accepted without ALL supporting documents. Please contact the Human Resources Bureau, Personnel Section if you have any questions.

- Application
- Photocopy of Driver License
- Photocopy of birth certificate. (Not hospital certificate.) Naturalization certificate (if applicable) must be verified.
- Photocopy of high school diploma or GED.
- Photocopy of college transcript (if applicable)
- Photocopy of Social Security card with correct name (as name will appear on pay-roll check.)
- If a military veteran, copy of Form D.D.-214 stating type of discharge. (Must be Honorable) OR, proof of registration as required by Federal Military Selective Service Act (males aged 18 - 26.)
<http://www.sss.gov/regist.htm>
- If certified in law enforcement or corrections, copy of P.O.S.T. certification.
- Be sure all names, addresses, phone numbers, and zip codes are accurate and complete.

IMPORTANT

THIS POLICY APPLIES TO ALL APPLICANTS FOR APPOINTMENT WITH THE Lewisburg Police Department. Applicant's present and past drug usage shall be determined through a background investigation and through a drug-screening test (urinalysis). The following admissions are grounds for automatic disqualification from further consideration as an applicant with the Lewisburg Police Department:

NO ADULT (over age of 18) illegal usage of controlled substances (excluding marijuana or its derivatives) within the past three (3) years.

NO (illegal) chronic use or pattern of controlled substance use will be considered.

Minor illegal experimentation of controlled substances under the age of 18 will be considered on a case-by-case basis.

NO chronic use will be considered.

NO USAGE or experimentation with marijuana or its derivatives within the last six (6) months.

NO REPEATED unlawful use of marijuana, beyond "experimental".

NO CONVICTION for DUI, during the past 60 months. Twice in an adult lifetime is an automatic disqualifier unless at least one conviction occurred greater than 15 years from date of application.

NO SALE, DISTRIBUTION, or DELIVERY of a controlled substance. If the incident(s) are outside the listed time frame for the controlled substance the evaluation will be on a case by case basis.

DURING LIFETIME:

NO ILLEGAL USAGE of a controlled substance, including marijuana, while (or after) employed by a law enforcement agency whether certified or non-certified position OR in law enforcement or correctional position. (Except as required by official law enforcement duties.)

NO ABUSE involving prescription medications.

I have read and understand the above and I am in compliance with the City of Lewisburg Drug Policy. I understand that providing misinformation on this form will subject me to immediate disqualification from processing.

Signature: _____ Date: _____

BACKGROUND INFORMATION:

NOTE: A "Yes" answer to these questions may automatically bar you from employment as a Law Enforcement or Corrections Deputy. The nature, job-relatedness, severity and date of the offense in relation to the position for which you are applying are considered. You must provide a full explanation before your application will be considered. Attach separate sheet if necessary.

1. ☐ Yes ☐ No Have you **ever** been arrested for or convicted of a crime?

If "Yes", what were the charges: _____

- ☐ Yes ☐ No Convicted

Location of Court: _____

Date of Conviction: _____

2. ☐ Yes ☐ No Have you **ever** pled *Nolo Contendere* or pled *Guilty* to a crime?

If "Yes", what were the charges: _____

- ☐ Yes ☐ No Convicted

Location of Court: _____

Date of Conviction: _____

3. ☐ Yes ☐ No Have you **ever** had adjudication of guilt withheld for a crime?

If "Yes", what were the charges: _____

- ☐ Yes ☐ No Convicted

Location of Court: _____

Date: _____

4. ☐ Yes ☐ No Have you **ever** used or possessed illegal drugs?

☐ Yes ☐ No Used? Last Date: _____

☐ Yes ☐ No Sold? Last Date: _____

5. ☐ Yes ☐ No Have you **ever** left employment while under investigation?

If yes, explain: _____

6. ☐ Yes ☐ No If you are currently employed by a law enforcement or corrections agency, are you now or have you ever been under internal investigation?